

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: MULTI-STAGE CODE GENERATOR AND  
DECODER FOR COMMUNICATION SYSTEMS

Attorney Docket Number:: 019186-003800US

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 20

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

## **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Iran  
Status:: Full Capacity  
Given Name:: M.  
Middle Name:: Amin  
Family Name:: Shokrollahi  
Name Suffix::  
City of Residence:: Berkeley  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 904 Regal Road  
City of Mailing Address:: Berkeley  
State or Province of mailing address:: CA  
Country of mailing address::  
Postal or Zip Code of mailing address:: 94708

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Denmark  
Status:: Full Capacity  
Given Name:: Soren  
Middle Name::  
Family Name:: Lassen  
Name Suffix::  
City of Residence:: San Francisco  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 233 Barlett St.  
City of Mailing Address:: San Francisco  
State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 94708

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Michael

Middle Name::

Family Name:: Luby

Name Suffix::

City of Residence:: Berkeley

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 1133 Miller Ave.

City of Mailing Address:: Berkeley

State or Province of mailing address:: CA

Country of mailing address::

Postal or Zip Code of mailing address:: 94708

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Customer Number:: 20350

### **Domestic Priority Information**

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

### Foreign Priority Information

Country::

Application number::

Filing Date::

### Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

11/21/01 11:21:01 AM